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PTO/SB/05 (11-00) Approved for use through 10/31/2002 OMB 0651-0032 Please type a plus sign (+) inside this box — U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number NGB-12930 UTILITY Attorney Docket No. PATENT APPLICATION Nobuyuki Tatsumi First Inventor TRANSMITTAL AUTOMATIC SAMPLER AND NEEDLE FOR ... EV004938606US Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1.53(b)) Assistant Commissioner for Patents **APPLICATION ELEMENTS** ADDRESS TO: Box Patent Application Washington, DC 20231 See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) [Total Pages Specification X Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications 1. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, ті. 🔲 paper or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) Assignment Papers (cover sheet & document(s)) - Detailed Description 9 - Claim(s) Power of 37 CFR 3.73(b) Statement 10. - Abstract of the Disclosure Attorney (when there is an assignee) English Translation Document (if applicable) 11 4. **X** Drawing(s) (35 U.S.C. 113) [ Total Sheets Copies of IDS Information Disclosure 12 Citations 5. Oath or Declaration [ Total Pages Statement (IDS)/PTO-1449 Preliminary Amendment Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d)) Return Receipt Postcard (MPEP 503) 14. **X** (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** 15. 🗶 Signed statement attached deleting inventor(s) Request and Certification under 35 U.S.C. 122 named in the prior application, see 37 CFR 16 1 63(d)(2) and 1 33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Check for \$740.00 6. **X** Application Data Sheet. See 37 CFR 1.76 17. 🗶 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No .\_. Group Art Unit Prior application information For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 007609 Correspondence address below X Customer Number or Bar Code Label (Insart Customer No. or Attach bar code label here) Rankin, Hill, Porter & Clark LLP Name 925 Euclid Avenue, Suite 700 Address

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Date

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01/24/2002

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## **FEE TRANSMITTAL** for FY 2002

Patent fees are subject to annual revision

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Complete if Known								
Application Number								
Filing Date	Herewith							
First Named Inventor	Nobuyuki Tatsumi							
Examiner Name								
Group Art Unit								
Attorney Docket No.	NGB-12930							

L	METHOD OF PAYMENT					FEE CALCULATION (continued)							
1. X  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:						3. ADDITIONAL FEES							
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SUBMITTED BY		Complete (if applicable)					
Name (Print/Type)	David E. Spay	Registration No (Attorney/Agent)	34,732	Telephone	(216) 566-9700		
Signature	Nath Son			Date	01/24/2002		

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